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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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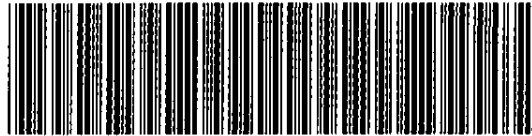
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2009 FEB 23 PM 4:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 Burch FEB 24 2009

## COVER LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: J.L. Lyons, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: Jacqueline Lyons  
Name (Printed or typed)

8925 S.W. 126 Terrace  
Address

Miami, Florida 33176  
City, State & Zip

786-255-1694  
Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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**ARTICLE I NAME**

The name of the corporation shall be:

J.L. Lyons, Inc.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal street address and mailing address, if different is:

8925 S.W. 126 Terrace, Miami, FL 33176

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To operate any and all legal business under the laws of the state of Florida and all remaining states of the United States, where permitted.

**ARTICLE IV SHARES**

The number of shares of stock is:

2,000,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Jacqueline Lyons, Director/Chair

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

J.L. Lyons - 8925 S.W. 126 Terrace, Miami, FL 33176

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

J.L. Lyons - 8925 S.W. 126 Terrace, Miami, FL 33176

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*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

*Jacqueline Lyons*  
Signature/Registered Agent

2/17/09  
Date

*Jacqueline Lyons*  
Signature/Incorporator

2/17/09  
Date